
Name

Address

City, State, Zip

Phone

Email

In the Juvenile Court of Utah

_____ Judicial District _____ County

Court Address _____

State of Utah, in the interest of

Last name, first name

Date of birth

A minor
[] under [] over 18 years of age, and
[] represented [] not represented.

Motion to Continue Hearing or Trial

Case Number

Incident(s)

Judge

1. I am _____ (relationship to case). I ask the hearing or trial scheduled for _____ (date) be continued to another date.

2. I make this request because:

3. I ask the hearing or trial be scheduled after this date: _____ .

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at _____ (city, and state or country).

_____	Signature ►	_____
Date	Printed Name	_____

Certificate of Service

I certify that I filed with the court and am serving a copy of this Motion to Continue Hearing or Trial on the following people.

Person's Name	Service Method	Service Address	Service Date
(Prosecutor)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Intake/Probation Officer)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Attorney General)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Guardian ad Litem)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		

_____ Signature ► _____
 Date _____
 Printed Name _____